

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-----------|--------------|-----------------|
| FEE DETERMINATION | <i>12</i> | | <i>8/27</i> |
| O.I.P.E. CLASSIFIER | | <i>8</i> | <i>8-30-00</i> |
| FORMALITY REVIEW | | <i>5915</i> | <i>10-17-00</i> |
| RESPONSE FORMALITY REVIEW | | <i>71476</i> | <i>1/23/01</i> |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 ÷ Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | | Date |
|-------|----------|------|
| Final | Original | |
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| Claim | | Date |
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| Final | Original | |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)